

**BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP**

TELEPHONE: (503) 439-8778

INTELLECTUAL PROPERTY LAW  
12400 WILSHIRE BOULEVARD, 7TH FLOOR  
LOS ANGELES, CA 90025

FACSIMILE: (503) 439-6073

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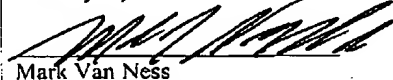
Deliver to: Ly, Anh Vu H Art Group: 2667  
Company Name: USPTO  
Facsimile No.: 571-273-8300 Date: July 6, 2005  
From: Mark C. Van Ness, Reg. No. 39,865  
Our Docket No.: 42390P19948X2 Number of pages 21 including this sheet.  
Application: 09/557,048 Filing Date: 4/21/2000

**Subject****P19948X2 Resubmission of facsimile****Remarks**

Dear Examiner Ly,

Pursuant to our conversation of July 6, 2005, I am resubmitting the response to the Office Action dated May 4, 2004, originally faxed on August 31, 2004. Also enclosed is a Fee Transmittal form and duplicate Fee Transmittal form. Please charge the one month extension of time charge to Account Number 02-2666.

Thank you,

Mark Van Ness  
Reg. No.: 39,865Katherine Jennings  
Legal Assistant  
Blakely Sokoloff Taylor & Zafman, LLP  
1925 NW AmberGlen Parkway, Suite 230  
Beaverton, OR 97006Phone: 503-439-8778  
Fax: 503-439-6073

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<b>FEE TRANSMITTAL</b> <b>for FY 2005</b> <small>Potential fees are subject to annual revision.</small>		<i>Complete If Known</i>	
		Application Number	09/557,048
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	April 21, 2000
		First Named Inventor	Nevo
		Examiner Name	Ly, Anh Vu H
		Art Unit	2667
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$) 120.00	Attorney Docket No. 42390PI9948x2

<b>METHOD OF PAYMENT</b> <i>(check all that apply)</i>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor &amp; Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input type="checkbox"/> Credit any overpayments	

**FEE CALCULATION**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	120.00
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
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1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
SUBTOTAL (2)					(120.00)

<b>SUBMITTED BY</b>		<i>Complete (if applicable)</i>	
Name (Print/Type)	Mark C. Van Ness	Registration No. (Attorney/Agent)	39,865
Signature		Telephone	(503) 439-8778
		Date	07/06/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

07/06/2005 15:04 FAX 503 684 3245

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Sep-18-2004 09:53am From-LF3 OFFICE AREA

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T-885 P.002

F-655

## Confirmation Report - Memory Send

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 Name : LF3 OFFICE AREA

Job number : 577  
 Date : Aug-31 11:10am  
 To : 97038729306  
 Document pages : 016  
 Start time : Aug-31 11:10am  
 End time : Aug-31 11:14am  
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 Status : OK

Job number : 577

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Intel Corporation  
 4050 Lafayette Center Drive  
 Chantilly, VA 20151

Intel Legal Team

Fax

Page 1 of 16

Urgent

Confidential

Date: August 26, 2004

To:  
 Examiner: Ly, Anh Vu H  
 USPTO

Fax:  
 (703) 872-9306

Att Unit:  
 2667

From:  
 James S. Finn

Fax:  
 703-633-3303

M/S:

Subject:  
 Application No.: 09/577,048; Inventor: Nevo, et al.  
 Filed: 4/21/00 DocId: No. P1994872

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Senta Evans

Date: 8/31/04

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 Fax Cover Sheet (1 page)  
 Transmittal Form (1 page)  
 Fee Transmittal (1 page, submitted with duplicate)  
 Amendment (11 pages)  
 Petition for Extension of Time (1 page)

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7036833303

T-895 P.003

F-855

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TO:

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Fax Information  
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Total Pages:

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Intel Corporation  
4035 Lafayette Center Drive  
Chantilly, VA 20151

Intel Legal Team

## Fax

Page 1 of 16

Urgent

Confidential

Date: August 26, 2004

To:	From:	App Date:
Recipient: LY, AND VIN USPTO	703-633-3303	2667
From:	To:	M/S:
James S. Finn	703-633-3303	

Subject:  
Application No.: 09/577,848; Invention: Novo, et al.  
Filed: 4/21/03 Docket No. P199-6822

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I hereby certify that the above listed correspondence is being facsimile transmitted to the  
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Serial Number: 09/577,848 Date: 8/31/04

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Fee Transmittal (1 page, submitted with duplicate)  
Amendments (11 pages)  
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7036333303

T-995 P.004/019 F-855

Intel Corporation  
4030 Lafayette Center Drive  
Chantilly, VA 20151

Intel Legal Team

# Fax

Page 1 of 16

Urgent

Confidential

Date: August 26, 2004

To:  
Examiner: Ly, Anh Vu H  
USPTO

Fax:  
(703) 872-9306

Art Unit:  
2667

From:  
James S. Finn

Fax:  
703-633-3303

M/S:

Subject: *PT*  
*✓ 7*  
Application No.: 09/577,048; Inventor: Nevo, et al.  
Filed: 4/21/00 Docket No. P19948X2

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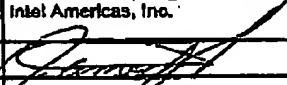
T-995 P.005/019 F-655

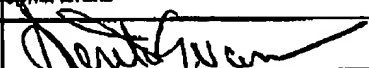
PTO/SW/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE.

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/557,048	
	Filing Date	April 21, 2000	
	First Named Inventor	Nevo	
	Art Unit	2667	
	Examiner Name	Ly, Anh Vu H	
Total Number of Pages in This Submission	15	Attorney Docket Number	P19948X2

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	James S. Finn, Reg. No. 38,450 Intel Americas, Inc.	
Signature		
Date	8-31-04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460 on the date shown below.		
Typed or printed name	Sertila Evans	
Signature		Date 8/31/04

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T-985 P.006/019 F-655

PTO/SB/17 (10-03)

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**FEE TRANSMITTAL  
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 110.00)

**Complete If Known**

Application Number	09/557,048	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b>
Filing Date	April 21, 2000	
First Named Inventor	Nevo	JUL 06 2005
Examiner Name	Ly, Anh Vu H	
Art Unit	2667	
Attorney Docket No.	P19948X2	

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit  
Account  
Number  
Deposit  
Account  
Name

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Intel Corporation

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Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			<b>(\$)</b>

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 43	Independent claims in excess of 3	
1203 280	2203 145	Multiple dependent claim, if not paid	
1204 88	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>			<b>(\$) 0.00</b>

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES****Large Entity - Small Entity**

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1806 1,840*	1806 1,840*	Requesting publication of SIR after Examiner action	
1261 110	2261 66	Extension for reply within first month	110.00
1252 420	2252 210	Extension for reply within second month	
1263 860	2263 475	Extension for reply within third month	
1264 1,480	2264 740	Extension for reply within fourth month	
1285 2,010	2265 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 280	2403 145	Request for oral hearing	
1481 1,510	1481 1,510	Petition to institute a public use proceeding	
1432 110	2452 55	Petition to revive - unavoidable	
1463 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(c)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.125(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.125(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 110.00)**SUBMITTED BY**

Name (Print/Type)

James S. Finn

Registration No.  
(Attorney/Agent)

38,450

Telephone 202-507-4607

Signature

Date

8-31-04

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T-995 P.007/019 F-655

PTO/SB/17 (10-03)

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**for FY 2004**

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Art Unit	2667
Attorney Docket No.	P19948X2

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Intel Corporation

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1004 770	2004 385	Reissue filing fee	
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1203 290	2203 148	Multiple dependent claim, if not paid
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SUBTOTAL (2) (\$ 0.00)

\*\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
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Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 110.00)

**SUBMITTED BY**

Name (Print/Type) James S Finn

Signature

Registration No.

38,450

(Attorney/Agent)

(Complete if applicable)

Telephone 202-807-4607

Date

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